PATENT	<b>APPLICATION</b>	<b>FEE DETERMIN</b>	ATION RECORD
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Effective October 1, 2000

Application or Docket Number

H-1014

CLAIMS AS FILED - PART I						SMALL ENTITY			OTHER THAN SMALL ENTITY			
(Column 1) (Column 2)					TYPE			OR				
TOTAL CLAIMS		47					RATE	FEE	1	RATE	FEE	
FOR		NUMBER F	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			47 <sub>minus 20=</sub>		• 27			X\$ 9=		OR	X\$18=	486
INDEPENDENT CLAIMS			26  minus  3 = 2		23	3		X40=		OR	X80=	1840
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	3036	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	CLAIM		ſ	+135=		OR	+270=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	μ	ADDIT. FEE			ADDII. FEEI	
		CLAIMS		HIGH	IEST	(Column o)	Г		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM					On :		
							L	+135=		OR	+270=	
							Δ	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	·					
	S 127	CLAIMS	* 4.1.10° A.	HIGH	EST		r		ADDI-			ADDI-
ENTC		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN.	T CLAIM		▎├			UH		
	If the autority of the		ha amenda astr	mn () ·······	o "Ω" : o = 1	luma 2		+135=	3	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  TOTAL  ADDIT. FEE												
· · ·		ımber Previously P nber Previously Pa							oropriate box			